Log No. <u>630</u>

FACILITY PERMIT APPLICATION CHECK-OFF & PRELIMINARY REVIEW SHEET

FACILITY NAME Macoupin C	righton/L	Brighton LI	F#1	_	
County, Cyfty SITE NUMBER /// 8030/ Date Rec	2-14-8	7 Owner RE	VIEWER(S)	2CM	
LCG IN AND CHECK OFF Type of Application: Development Operating	Sup (to modify D	Logged E/OP) nsfer/Other Notification	I in PA	12-14- Date X Complete	±3 Incomplete
Notification Letters Mailed Copy of the Application Sent to Region Unit: RCRA Regional Facilities Type of Facility		Application to Sec	-	Initials Ponly) PM	Date
Siting	tegional Pollution Control	Facilityyes		Initials	Date
Approval received Date Not received Time waiver received Date date final	Notify Dept. o	of Transportation	- - -		
Not fication Project Summary To: From: APC Signification: Feply From: APC Signification: Date Not Signification:	Memo to LPC PWS ant PWS D	WPC Coord Significant ate Not Signific	WPC	Date Not Si	
2 CP/SUP Application: Enforcement Memo Received REVIEW ACTION Special Review Requested of:		•	eived	(Date)	_
Review	er 1	Reviewer 2 or special reviewer		Unit Manager	
Permit Not Required	Initials	Date	Initials	Date	Initials
Grant	re	(Date)	EP/	A Region 5 Records	Ctr.
Letter Mailed Letter Mailed Initials	2-1-84 Date	Application logged out	RA Initials	2-/- Date	84